	ł					•			10	\ W	74.6	dol	
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 Application or Docker Number CRA 003 - 20 US													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS			5					RATE	FEE	٦ :	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ĺ	BASIC FI	EE 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			6 minus 20=			.0		X\$-9=		1	Your		
INDEPENDENT CLAIMS			/ minus 3 =		*	À		—	-	OR	\		
<u> </u>		NDENT CLAIM P			<u> </u>	٧		X43=		OR	X86=		
						المحا	j	+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	7%	
CLAIMS AS AMENDED - PART (I (Column 1) (Column 2) (Column 3)							L	SMALI	ENTITY	OR	OTHER SMALL		
AMENDMENT A	A,	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.6	Minus	# 6	0	=		X\$ 9=	1	OR	X\$18=	İ	
ME	indep ndent	* [Minus	*** &	3	=]	X43=		OF	X86=		
٩		NTATION OF MI	ULTIPLE DE	PENDENT	CLAIM		}_	11.45	+	1	+290=		
	(-20 27 31 36 TS 48 TS 50							+145= TOTA		OR	+29U= TOTAL		
	(Column 1) 3 (Column 2) (Column 3)							ADDIT. FEI		OR	ADDIT. FEE		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N O N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AMENDM	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						•	+145=		OR	+290=		
								TOTAL		OR	TOTAL ADDIT. FEE		
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE													
ENTC		CLAIMS REMAINING AFTER AMENDMENT	,	HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
<u>§</u>	Total	*	Minus	##				X\$ 9=		OR	X\$18=		
AMENDMENT	Independent	*	Minus	***		=	 	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM			A40=		OR			
+145										OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		mber Previously Paid ber Previously Paid					r fou	nd in the ap	pr priat bo	c in colu	umn 1.		